



## FOR IMMEDIATE RELEASE

September 9, 2020 Meghin Delaney Communications Director

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## **COVID-19 Daily Press Bulletin for 9-9-2020**

Carson City, NV — Today, Caleb Cage, Nevada COVID-19 Response Director and Julia Peek, Deputy Administrator of Community Health Services, were joined by Dr. Mark Pandori, Nevada's Chief of Testing, to provide updates on Nevada's ongoing COVID-19 response, testing and reporting during a teleconference with members of the media.

This bulletin provides facts, figures, and informational items from the call. As a reminder, data is provided in a dashboard on the home page of the <a href="Nevada Health Response">Nevada Health Response</a> website and can be accessed 24 hours a day.

## **SUMMARY:**

- As of today, Nevada has logged 72,258 cases, an increase of 154 new cases, 99 or 64.3% were in Clark County, with 42 or 27.3% in Washoe County, and 13 or 8.4% were spread throughout the State.
- Nevada has now completed a total of 907,451 molecular tests since the beginning of COVID-19, an increase of 1,926 since yesterday.
- Again, Nevada recorded a very low number of tests yesterday, no specific issues have been identified.

- The cumulative test positivity rate is at 10.4%. The daily positivity rate is at 7.9%.
- For the most recent 7-day period, cases are growing at a rate of 0.5%, or 341 new cases per day. For comparison, the growth rate for the 7-day period ending July 31 was 2.3%, or 1,037 new cases per day.
- Nevada recorded an additional 19 deaths today. Please keep in mind that the death rates we are seeing correspond to cases diagnosed up to 5 weeks ago.
- Nevada has 552 hospitalized COVID-19 patients as of yesterday, September 8, 2020. This includes 452 confirmed patients and 100 suspected patients. Statewide hospital occupancy rates are 68% while intensive care units (ICU) are at an occupancy rate of 57%. About 34% of the ventilators statewide are in use right now for all patients.
- We have identified a total of 15,896 total cases to date as a result of contact tracing efforts. This represents a total of 22% of the cases to date.
- The number of cases identified has experienced consistent growth since contact tracing began. This is in a large part due to the Southern Nevada Health District and their increased staffing of case investigators. As of today, they no longer have a backlog of cases and are able to maintain a rate of more than 95% of cases notified within 24 hours.
- Related to contact tracing, from 8/31 –9/8, Deloitte agents logged a total of 11,856 calls as of 8 PM PST on September 8th.
  - Of these calls, there were 1,079 inbound calls received and 10,777 outbound calls made.

- Deloitte's SMS campaign resulted in 17,324 total SMS messages sent, with 6,415 unique outbound communications and a peak response rate of 85% from unique contacts on 9/8.
- For the week of 8/30, Deloitte agents completed 1,784 contact trace reports, with 1,452 contacts showing no symptoms and 332 contacts showing symptoms.
- For the period of 8/23 to 9/5, some highlighted outcomes of these calls:
  - 30% of contacts were made successfully and there was discussion about their exposure and their quarantine. 51% of the time, the tracer left a voicemail.
  - 4% had no answer and no ability to leave a voicemail.
  - 2% resulted in the individual answering, but they refused to have a discussion.
  - The remaining had a variety of other outcomes.
- Total Calls Logged To-Date: 79,956 (starting June 18<sup>th</sup> through yesterday).
- Related to the COVID Trace app, as of this morning, the State has a total of 25,234 downloads.
- If anyone has questions or challenges in downloading the app, you can email <a href="mailto:help@covidtrace.com">help@covidtrace.com</a>
- Nevada looks at lab reporting data on a regular basis. There are two
  relevant technical bulletins that have been released in the last week
  that are worth noting.

- The first relates to point of care testing. Nevada has point of care tests throughout the state and that inventory is constantly growing. It is important to differentiate the type of test (molecular, antigen, antibody) and what is considered a screening test versus a confirmatory test. This bulletin also outlines what is reportable to the state or local health department.
- The second bulletin went out to State laboratories and emphasized the importance of reporting accurate patient detail on those requisitions. This is the information the State uses to follow up on cases. If the information on the document is not accurate or complete, this delays the State labs ability to start the disease investigation process.
- Related to vaccination efforts, the Nevada State Immunization
  Program is working with local public health and emergency
  management partners to prepare for mass vaccination events across
  the state when a COVID-19 vaccine becomes available. A tiered
  system has been developed and is currently being vetted; this
  includes critical infrastructure personnel, including grocery workers,
  frontline health care workers, and other personnel who keep Nevada
  operational and Nevadans safe.
- It is extremely important for everyone to get their flu vaccine this year
  as it will help keep unnecessary respiratory illness out of Nevada's
  hospital system. Local public health partners will be doing mass
  vaccination events for the annual flu to increase access to the flu
  vaccine and as an opportunity to practice mass vaccination events for
  the COVID-19 vaccine.
- In regards to testing, the State has recently experienced a decrease in specimen submission, equating to a lower volume in the last 14 days.

- No established reason for this decrease, as capacity remains consistent as well as an opportunity for those throughout the State to get tested at various locations.
- In regard to testing, the State testing labs have been adding equipment to expand testing throughout Nevada.
- The State has a determined amount of supply materials allocated for all of the various types of testing, both molecular and antigen testing.
- The State continues to perform research in real-time epidemiological testing and genetic sequencing as related to the virus and any mutations.